BOE-237-A (S1F/S1B) REV. 2 (08-2006)

SUPPLEMENTAL AFFIDAVIT FOR BOE-237 **HOUSING -- LOWER-INCOME HOUSEHOLDS ELIGIBILITY BASED ON FAMILY HOUSEHOLD INCOME (Yearly Filing)**

TULARE COUNTY ASSESSOR 221 S. MOONEY BLVD., ROOM 102-E VISALIA, CALIFORNIA 93291-4593

(559) 636-5100 FAX: (559) 737-4468

states:

Carefully read and follow the accompanying instructions before preparing claim.

This affidavit is required under provisions of Sections 251 and 254 of the Revenue and Taxation Code for those tribes or tribally designated housing entities filing Form BOE-237, Exemption of Low Income Tribal Housing.

(name of person making affidavit)

This affidavit supplements the claim for exemption and must be filed with the Assessor. If you do not complete and file this form it is grounds for denial of the exemption.

1. That as							
2. of the			(title, such as President, et	tc.)			
3. the mailing address o	of which is	(name of tribe or tribally desig	nated housing entitty)				
_	_		(give complete mailing add	dress includ	ing zip code)		
4. for property located a			(give complete address of pr	operty, incli	iding zip code)		
5. That this affidavit is a	made on behalf of th	ne above organization i	n support of a clain	n for ex	emption for the _		fiscal year.
	ELIGIBILI	TY BASED ON FA	MILY HOUSEI	HOLD	INCOME		
Section 237 of the Calif can qualify for an exem the amounts listed below	ption from property						
No. of Persons in Household	Maximum Income/Rent	No. of Persons in Household	Maximum Income/Rent	No. o	f Persons in Household	Maximum Income/Rent	
1	\$ 31,250	4	\$ 44,650		7	\$ 55,350	
2	\$ 35,700	5	\$ 48,200		8	\$ 58,950	
3	\$ 40,200	6	\$ 51,800				
UNIT NUMBER			NO. OF PERSONS IN HOU (may be more than one hou	USEHOLD	ormation; use addition MAXIMUM INCOME FOR HOUSEHOLD	RENT DOES NOT	ary)
UNIT NUMBER (use two lines if there are two households in a unit)			unit)		DOES NOT EXCEED	EXCEED	
1.							
2. 3.							
4.							
5.							
B. RECAP FOR AL	L HOUSEHOLI	S, ELIGIBLE ANI	D INELIGIBLE				
Note: The low-incom	e exemption calcula	tion is the value of low	v-income household	ds to the			
					EXAMPLE	ACTUAL	
1. Total number of hous			100				
2. Number of qualified low-income households 2. Total area of hydding(s) (square feet)					40		
3. Total area of building(s) (square feet)4. Area of qualified low-income households (square feet)					150,000		
4. Area or quanned low	-meome nousenoid:	s (square reet)			75,000	<u></u>	
		CER	FIFICATION				
I certify (or declare) under pe statements or documents, a	is true, correct, and co	omplete to the best of my		f.	-	uding any accompany	ving
SIGNATURE OF PERSON MAKING	AFFIDAVIT	TITLE			DATE		

Instructions for Completion of Supplemental Affidavit for BOE-237

Housing --- Lower-Income Households Eligibility Based on Family Household Income

The claimant (tribe or tribally designated entity) must follow the instructions listed below. The claimant should provide each household living on the property with a copy of the form titled *Lower-Income Households - Statement of Family Household Income* to be filed with and maintained by the claimant. The organization's property will not be allowed the exemption unless the proper information is provided to the Assessor in a completed affidavit, in duplicate.

- A. The claimant must list on the affidavit the following information for only those lower-income households that qualify:
 - (1) Home address, apartment number, room number, etc. Use two lines if there are two households at the same location, etc.
 - (2) The number of persons claimed to be in the household (one household for each line item).
 - (3) The maximum income limit reported by each household (this figure should agree with the income limit based upon number of persons in the household that is printed on the affidavit.

NOTE: No reporting **by line item** is necessary for vacant room (areas), households that did not report, households that may not be lower-income, or for households whose incomes exceed the applicable income limits.

B. The claimant must complete the "Recap" section of the affidavit for all households, eligible and ineligible, to show that at least 30% of the housing units are occupied or held for low income tenants.

	Example
(1) The total number of households.	100
(2) The number of low-income qualified households (one for each line item comp	oleted in A, above). 40
(3) The total area of the building(s) (square feet).	150,000
(4) The area of qualified low-income households (square feet).	75,000